

LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.
Registrations expire on January 31 unless a renewal is submitted between December 1 and January 31.

365
Lobbyist's Registration Number

Instructions

- Print in ink or type.
- Complete form, have it notarized and return with \$10 registration fee to the Board of Ethics, 8401 United Plaza Blvd., Suite 200 Baton Rouge, LA 70809-7017, (504) 922-1400.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Renewals must be submitted between December 1 and January 31.

FOR OFFICE USE ONLY

Postmark Date: 1-29-98

REG

1981283

1. NAME WATKINS SHIRLEY GOTTSCHALCK

Last

First

MI

2. BUSINESS PHONE 504-796-3326 FAX 504/796-8176

Area Code and Phone Number

3. BUSINESS ADDRESS 76385 HWY. 1077 FOLSOM, LOUISIANA 70437

Street and No.

City

State

Zip

4. EMPLOYER La. Justice of the Peace and Constable Association

5. EMPLOYER'S ADDRESS 76385 HWY. 1077 FOLSOM, LOUISIANA 70437

Street and No.

City

State

Zip

6. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

1. Name LOUISIANA JUSTICE OF THE PEACE AND CONSTABLE ASSOCIATION

Address 76385 HWY. 1077 FOLSOM, LOUISIANA 70437

Business or purpose GET LAWS PASSED THAT BENEFIT JUSTICE OF THE PEACE AND CONSTABLES.

Does this person pay you? NO.

If No, who pays you? GIVES ME EXPENSE

2. Name _____

Address _____

Business or purpose _____

Does this person pay you? _____

If No, who pays you? _____

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Lobbyist's Registration Number

3. Name _____
Address _____
Business or purpose _____
Does this person pay you? _____
If No, who pays you? _____
4. Name _____
Address _____
Business or purpose _____
Does this person pay you? _____
If No, who pays you? _____
5. Name _____
Address _____
Business or purpose _____
Does this person pay you? _____
If No, who pays you? _____

State of Louisiana

Parish of St. James

Before me, the undersigned authority, personally came and appeared Shirley H. H. H. H. H. who, after being duly sworn by me, did declare and acknowledge to me that the above statements are true and correct.

Shirley H. H. H. H. H.
Signature of Lobbyist

Sworn to and subscribed before me on this 13th day of

February, 1998

C. Moore
Notary Public

Rev. 8/97

ATTACH
2" x 2"
PHOTOGRAPH
HERE
FOR
INITIAL
REGISTRATION
ONLY

